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WASHINGTON,	DC 20036		- CATALOGUE AND				(Depositor's name)
			protection of the last				(Signature)
			anatario-maile anatario-maile				(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/564,185	10/564,185 08/07/2006		Hans-Peter Buchstaller		030863-00004		8027
TITLE OF INVENTION:	BENZIMIDAZOLE D	ERIVATIVES AS RAF I	KINASE INHIBITORS				
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0		\$1810	02/18/2010
EXAMII	NER	ART UNIT	CLASS-SUBCLASS				
LOEWE, SU	IN JAE Y	1626	514-359000				
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
PLEASE NOTE: Unle recordation as set forth (A) NAME OF ASSIG MERCK PATE	ss an assignee is ident in 37 CFR 3.11. Com NEE NT GMBH	ified below, no assignee pletion of this form is NO	THE PATENT (print or type data will appear on the port a substitute for filing an (B) RESIDENCE: (CITY DARMSTADT, rinted on the patent):	atent. If an assignassignassignment.  and STATE OR C	OUNTI	RY)	
4a. The following fee(s) at Issue Fee  Publication Fee (No. Advance Order - #	small entity discount	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number					
5. Change in Entity Statu a. Applicant claims NOTE: The Issue Fee and	SMALL ENTITY state	us. See 37 CFR 1.27.	b. Applicant is no longed from anyone other than to office.				
Authorized Signature _ Typed or printed name	Ronald I	E Oran J	2793/	Date <u>Fe</u>	bru:	ary 12, 20 41,104	)10

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Departmerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.